


ABORTION



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THE LAW AGAINST
ABORTION

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THE LAW AGAINST ABORTION

ITS PERNICIOUSNESS DEMONSTRATED
AND ITS REPEAL DEMANDED

By

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SOCIETY; THE AMERICAN ASSOCIATION FOR THE ADVANCEMENT
OF SCIENCE; FOUNDING MEMBER OF THE WORLD LEAGUE
FOR SEX REFORM

Back to the Roman Law "INFANS PARS VISCERUM MATRIS!" The fetus is part of the mother's organs. Therefore she ALONE has the right to decide about it.

—PROF. J. KOCKS, Bonn, Germany.

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PREFACE

The Three Stages in the Limitation of Offspring

In the beginning there was *Infanticide*. Superfluous or unwanted children were simply killed off—exposed to the elements, thrown into the river or drowned in a tub, suffocated or poisoned. Then came *Abortion*. As the nations became more civilized, killing off living children ceased to appeal to them; it didn't seem to them quite nice. They saw clearly that it was much better not to permit the unwanted fetus to grow, to develop into a child and be born than to let it be born and then be killed. And still later came *Prevention*. All reasonable people saw clearly that it was much better, from every point of view, both hygienic and ethical, to prevent a conception than to let a conception and pregnancy take place and then to interrupt it. *All* thinking people now agree that there is *nothing whatever* objectionable ethically in *preventing* the ovum

from being fertilized. Only perverted minds living in impenetrable medieval darkness still believe *or claim to believe* that prevention of pregnancy is equivalent to the interruption of pregnancy and that both are equivalent to murder or even *worse than murder*. (Yes, some apparently sane people say just that; their exact words will be found quoted in the text of this book.)

And believing that Prevenception is in every way unobjectionable, and *is and always will be* the method of choice in the limitation of offspring and in regulating the population, I am now just as ardent in my advocacy of it as I have ever been. But as there are cases in which the induction of an abortion is inevitable, necessary, imperative, it is important that both the attitude of the public and the law be changed. And that is the object and aim of this book.

I am in favor of the universal spread of the knowledge of Prevenception, in order that abortion may become unnecessary. But I repeat what I have always maintained: Abortion is an evil, but in some cases it is so decidedly the lesser of two or three evils that there can be no question of the *proper* choice. And while the induction of

an abortion is legally a crime, there are cases in which to refuse to perform an abortion is a much greater crime than to perform one.

Dixi et salvavi animam meam.

DECEMBER 8, 1932.

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**THE LAW AGAINST
ABORTION**

CHAPTER ONE

ABROGATE THE ABORTION LAW

I shall not beat about the bush, I shall not shilly-shally, I shall not equivocate. What I have to say, I shall say in clear, unmistakable language. And what I shall present in this volume is neither more nor less than this: A DEMAND FOR THE COMPLETE AND TOTAL ABROGATION OF ANY LAW AGAINST ABORTION. And if complete abrogation is impossible at this time, then at least a very radical modification. I have always been moderate in my views, I have always believed that half a loaf is better than no bread, and so I should be satisfied for the present with certain definite modifications which I shall indicate.

I know that my demand for the abrogation of all anti-abortion laws will shock my dear confrères, just as my advocacy of the abrogation of anti-prevention laws shocked them thirty years ago, but a shock is good for people in general, and particularly so for my colleagues of the medical profession. Intellectual shocks are indispensable for progress, for making people

get out of a rut. People who never get their ideas shocked are apt to sink into a morass of indolence and sloth. Their brain cells get atrophied. So I need offer no apology for shocking my confrères as well as a section of the laity.

And I express confidently the hope that just as thirty years after the commencement of my prevenience propaganda the law against prevenience had become a dead letter, so in thirty years from now will the law against abortion be dead or moribund. It may not be taken off the statute books, but it surely will have fallen into innocuous desuetude. For I shall have no difficulty in demonstrating the perniciousness of the abortion law, *without any compensating features*. And I have sufficient confidence in the intelligence of at least a portion of mankind to believe that, if you have a good valid cause and you can present its merits clearly, you will be successful in converting them to your point of view.

I well remember my first approach to old Dr. Jacobi, with the timid attempt to convert him to the cause that was so dear to me—the cause of birth control by prevenience. And to show how muddled the ideas on this subject were at that

time it is sufficient to say that the answer of the Father of American Pediatrics, a man who stood head and shoulders above most of his colleagues, was to the effect that it was the physician's duty to preserve life, not to destroy it. I was rather shocked. But when I asked him if he would listen to my arguments if I could *prove* to him that pre-venception or birth control, far from destroying life, saves lives, that it is the greatest factor in diminishing infantile mortality—a subject particularly dear to his heart—he became interested. And so interested was he, and so unanswerable were my arguments—for the arguments for birth control *are* unanswerable—that he soon became a convinced believer in Prevenception; while never an active worker in the cause, he was always willing to lend it the influence of his name. In 1911 he accepted the Honorary Presidency of The American Society of Medical Sociology, one of whose chief aims was the propagation of the ideas and the dissemination of the knowledge of pre-venception; in 1912, when President of the American Medical Association—the greatest organized medical body in the world—he made the subject a part of his Presidential address, and he was gracious enough to write the Introduction to

my book "Birth Control or the Limitation of Offspring by Prevenception," which greatly contributed to making the subject "respectable" among the members of the medical profession. And so I hope to be equally successful with the presentation of my thesis on the abortion question.

It is not to be thought of course that Dr. Jacobi was unique in his views on prevenception. Twenty years after he became a convert to the cause, the Editor of the high class *Boston Medical and Surgical Journal* (now the *New England Journal of Medicine*), in commenting upon a statement made by Havelock Ellis to the effect that the physician has no more serious and responsible duty than that of giving information on the prevention of undesirable pregnancy, delivered himself of the following piece of wisdom: "That the physician should be the purveyor of the popular knowledge of contraceptive methods seems a *prostitution* and *perversion* [italics mine] of his special function to preserve rather than prevent life." And I cannot refrain from repeating the comment on the Boston editor's statement that I made at the time. It will bear repeating, because it applies to abortion as well

as to prevenience. Here is what I said at the time:

Isn't the prevention of life very often in the highest degree preservation of life? When a woman has a narrow deformed pelvis, or when she suffers with kidney disease or heart disease or tuberculosis, then isn't the prevention of a potential child the preservation of the life of the existing mother, in the real sense of the word? And if the mother is weak and exhausted from repeated labors, then isn't the prevention of conception in her case a real measure of health and life, and isn't the prevention of more children than the parents can support a real preservation of the lives of the children already existing? (For generally speaking the mortality among the children of large families is two and one-half times as large as the mortality among the children of small families.) And if we advocate the prevention of conception among epileptics, syphilitics, idiots, imbeciles and the feeble-minded, habitual criminals and sadists, do we not thereby wish to preserve the life of the race, and aren't those who cry, life! life! at all hazards, caring only for the quantity and not for the quality of the offspring, the real destroyers of the life of the race?

For the one thousandth and first time we shall repeat, and we shall repeat it again and again, that we want life, but only such life as is desirable to its possessor and to those around. Such life is desirable and sacred. But life that is a curse to its possessor and which he goes on living merely out of cowardice, a life of pain, a life of disease, a life of shame, a life of endless poverty, struggle and drudgery, a life of misery to its possessor and to those around him and to the race in general, is not desirable and is not sacred. And to prevent such life is the highest service that a man can render to the individual family, to the community and to the human race as a whole!

And again only the other day I was shocked by the following item in a medical journal (*Medical World*, December 1932) :

“Prevention belongs in the same class of actions as abortion. It is a premature abortion. That is the true nature of every effort to prevent conception following the sexual act. Nature originated the sexual act for procreation only, and not as a diversion, amusement or business. Therefore, it follows that methods of cheating nature are wrong, no matter when performed.

The distinction between prevenience and abortion is wholly artificial and consequently fallacious."

And this after thirty years of propaganda by word and pen, in which we emphasized the difference between prevenience and abortion, and demonstrated with unanswerable arguments that prevenience was one of the most important measures for the welfare of the individual, the community and the race.

And here is the stand of the Catholic Church on prevenience. Says Rev. Paul L. Blakely, S. J., in an article published in the Catholic weekly, *America*: "To put the matter as clearly as I can, I will say that on the day when the Catholic Church exhorts her children to lie and steal, and blesses the hand of the unnatural son who cuts the throat of his mother, and raises to her altars the brute who has violated the virginal purity of his own daughter—on that day will she to whom has been given the Divine commission to teach with authority, permit her children to use artificial methods of birth control. But not before that day."

But we do not have to go back to the Reverend Blakely. Only the other day, namely on Decem-

ber 11, 1932, Reverend John S. Middleton delivered himself of the following remarkable statement at St. Patrick's Cathedral of New York City. Said the good Reverend, "If birth control is to be sanctioned because of economic stress, then why is it not just as logical to sanction kidnapping of babies and murder for the same reason?"

Oh, ye gods, putting the use of a harmless method of prevention of conception on exactly the same level with kidnapping of babies or murder!

This being the attitude of the Church on prevention, you can imagine what it is on the question of abortion. But it is not necessary to go to the Catholic or to any other Church to learn how mediievally savage people still are. Many members of our medical profession are not any more enlightened, are not any less brutal in their views. At a symposium on abortion didn't one member of our profession, Dr. Keitz is his name, deliver himself of the following noble sentiment, offer the following humane advice: "My advice is not to go to cases of hemorrhage from criminal abortion at all. I refused once to go to such a case, and the messenger threatened to have

my license taken away from me because I would not help the bleeding. A woman committing this crime *should die*, as she has taken human life, and her life should be the penalty." That is what *some* members of our profession think of the "crimes" of abortion.

And yet in spite of the dark and savage ideas on the subject of abortion that are still entertained by the Church—churches and religions of all denominations—by the medical and legal professions and by a large part of the laity, I hope with this small volume to change the general attitude, and to change the law or at least to make it a dead letter.

CHAPTER TWO

ABORTION AND PREVENCEPTION

Let there be no misunderstanding. My views on the relative importance and need of prevention and abortion have not changed. I do not see eye to eye with some of our ultra-radicals who consider abortion a matter of no importance (I mean ethically, not hygienically), and who would permit the artificial emptying of the uterus at any time—even as late as the seventh or eighth month; some go further and would not recoil even from an early infanticide. I do not wish to be considered an apostle or adherent of that sort of ultra-radicalism. I still consider abortion an evil, and my lifelong advocacy of prevention had as one of its aims the avoidance of the necessity of abortion. Yes, abortion is an evil, and always will be one. But very often, I repeat, it is so much the lesser of two evils, that there cannot be a moment's hesitation as to the choice. As I said more than once, there are circumstances under which to refuse to induce an abortion is a much greater crime than to induce

one. There are circumstances under which pregnancy is such a calamity, such a dreadful catastrophe, so full of agony to several people, so certain of death to at least one person, that to permit it to go on to term and do nothing is a real crime; a greater moral crime than any on our statute books.

It is quite possible, and we hope it may soon become a reality, that with the perfection of our preceptives and with the more widespread knowledge of preception, the need for artificially induced abortion will become rare, very rare indeed. But that time is not here yet. Few of the preceptives are one hundred per cent reliable, their application is sometimes slipshod, sometimes people find themselves without preceptives when passion makes them lose their heads, pregnancy from rape or from incestuous relations is not such a rare occurrence as the general public is apt to think, and most important, there are still millions of women who do not know anything of preception, don't know what preceptives to use, how to use them and where to obtain them. That this is so, our daily mail abundantly demonstrates. And as long as this state of affairs persists, as long as the condi-

tions enumerated remain factors to deal with, there will remain the need for the occasional induction of an abortion, or, as some doctors prefer to call it, more euphoniously, for curetting the uterus.

I repeat once more: Abortion is an evil, and *an evil it will always remain*. But sometimes a *very necessary* evil. And a *necessary* evil may sometimes be regarded in the light of a blessing. And therefore whatever we may think of the altruism and humanitarianism of the physician performing abortions, he can often be considered a true benefactor. He may not be an altruist, but the fact is undeniable that he has often saved girls and married women from suicide and death and whole families from shame, degradation and social ostracism.

Those are my views on abortion and the occasional abortionist. It goes without saying that for the professional abortionist, who makes a business of people's misfortunes, who tries to squeeze the last cent out of the victim, who will not perform the little operation unless he gets his exorbitant fee, I have nothing but contempt. An altruistic physician does it, when necessary, for a nominal fee, and often altogether gratis.

NO NEW REVELATION

Nor must you think that my ideas about abortion are the result of a sudden revelation; that up to now I lived in darkness on this subject, but have suddenly seen the light. Twenty-two years ago, namely in 1911, I read a paper before the Eastern Medical Society entitled "The Question of Abortion Considered in Its Ethical and Social Aspects," in which I took practically the same stand as I do now in this book. But then, nearly a quarter of a century ago, the time was not yet ripe. Even the subject of prevenience was considered shocking, unethical, unworthy of a respectable physician; and we had to lay all our stress on, devote all our energy to the propaganda of prevenience. But now that the prevenience battle has been won, now that only morons and Rip Van Winkles who have lain intellectually dormant during the past thirty years still try to sweep back the waves of the preventive ocean, we are permitted to go a step further and devote some of our energy to the subject of *necessary* abortion.

I had summarized the above referred to paper in twelve paragraphs to which I am willing to

subscribe today as readily as I did twenty-two years ago; if anything, more emphatically. Those conclusions were—and are:

1. Abortion is an unpleasant business, ethically, has always a slight element of risk in it, and, if improperly performed, often leaves the woman an invalid.

2. The best way, the only proper way, of dealing with abortion is to obviate the necessity for it.

3. The best way, the only proper way, of obviating the necessity for abortion is to teach the people the proper means of preventing conception.

4. To be able to teach the people the proper means of preventing conception, it is necessary to change the brutal and stupid law making the imparting of such information a crime punishable by five years in prison and five thousand dollars fine.

5. To call a physician who, under certain special circumstances, found himself obliged to induce an abortion a murderer, to call every woman who has undergone an abortion a murderess, is silly and hypocritical, and those that apply these terms generally know that it is so.

6. I should like to see the term criminal abor-

tion applied with more discrimination than it is now [or altogether discarded]. I know that the induction of abortion is legally a crime, but that does not mean that it is always morally a crime. Just as there are many actions which are not at all punishable by law, but are nevertheless the blackest of crimes from a moral point of view.

7. As long as our social system remains as it is at present, as long as marriage remains an unattainable ideal for many women, as long as the vast majority of people remain ignorant of any means of preventing conception, as long as illegitimate pregnancy is a matter of the greatest shame, as long as illegitimate motherhood is the greatest disgrace for the mother and illegitimate childhood the direst calamity for the child, so long will there be a tremendous demand for abortions, and so long will the demand be satisfied. If not by those in the profession, it will be satisfied by those out of it—and satisfied in a bungled, sometimes dangerous manner.

8. We can hardly escape the conclusion that under the conditions enumerated in the preceding paragraph the induction of abortion is often morally justifiable, and sometimes morally imperative.

9. It is a very serious question with me whether the physician who under certain circumstances induces an abortion is not morally a better man than he who closes his ears, his eyes and his heart to the tearful pleadings of these most unfortunate victims of our false social system and false morality, and tells them either gently or roughly to get out of his office, and not dare to insult him with the proposal to commit a crime.

10. Under the conditions enumerated in paragraph 7, the abortionist is a necessary evil. And while I heartily approve of the activity of our medical societies in prosecuting unlicensed practitioners and quacks, I have no sympathy with the work of spying upon and hunting down and prosecuting the abortionists. Our societies could have their time employed to better advantage. I may find very few people to agree with me on this point, but it is my opinion, and I must express it, for I have promised myself either not to speak at all, or when I do speak, to speak the truth as I see it, and the whole truth.

11. It is well to bear in mind that he who cries out most loudly against the nefarious crime of abortion in public is occasionally quite an in-

dustrious abortionist within the four walls of his office.

12. The last word has not yet been spoken on the subject. I do not claim it has. But whatever the opinions may be, it is time that the question of the justifiability of abortion under certain even nonpathologic conditions be free from cant and hypocrisy, hysteria, theologic and traditional bias, and be discussed in a calm, judicial, scientific, and above all, humane spirit.

The only change I would make in the above conclusions would be to eliminate the first sentence of paragraph 12. For I believe now that the last word *has* been spoken on the subject, and it is time for all enlightened liberals in and out of the profession to work for the repeal or the modification of the anti-abortion laws in our federal and state penal codes.

CHAPTER THREE

ABORTION AND THE CHURCH

It is but reluctantly that I bring the Church into the discussion of the abortion question. Yet, in view of the fact that the Church was primarily responsible for and is now the strongest bulwark of the abortion law, that it is chiefly because of the Church that the liberalizing of the abortion laws has been impossible, a word on the subject cannot be avoided.

Now, I have no quarrel with the churches; Catholic, Protestant, Jewish or Mohammedan, for their attitude toward abortion. Such are their beliefs and with religious beliefs we cannot quarrel or argue. If they believe, as the Catholic Church does, that even if the mother's life is in imminent danger abortion is not permissible, and that it is better to let the mother die than to remove an unformed embryo from the womb, if they believe that even in case of rape by a brute of an alien race or in case of incest, abortion is murder, if we are told that "the doctrine of the Catholic Church, her canons, her pontifical con-

stitutions, her theologians, without exception, teach, and constantly have taught, that the destruction of the human fetus in the womb of the mother, at any period from the first instant of conception, is a *heinous* crime, equal *at least*, in guilt, *to that of murder*," that "the young woman whose virtue has proved an insufficient guardian to her honor, when she seeks by abortion to save in the eyes of man that honor she has forfeited, incurs the additional and deeper guilt of murder in the eyes of God, the Judge of the living and the dead"—if this is the way the Church believes, it is her privilege so to believe.

But I cannot help calling attention to a "little" inconsistency, an inconsistency which would be screamingly, unbelievably funny, if it were not so deeply, so terribly tragic. If the removal of an aggregation of a few cells the size of a pinhead, a pea or a walnut is a "heinous crime, equal at least in guilt to that of murder," then what sort of a crime is the actual deliberate murder of ten million fully developed, fully grown, able-bodied men, men in the full enjoyment of health, men who are the pick of the nation? Anybody not an utter imbecile, not a hopeless moron, would readily agree that this is a billion billion times

more heinous crime. *And yet this heinous crime is permitted, approved and blessed by the Church!* Isn't this a terribly tragic, an unspeakably criminal inconsistency? Yes, I say this horrible crime of the deliberate murder and mutilation of millions of the physically best specimens of the race is permitted, approved and blessed by the Church, by all churches of all denominations. Yes, the Church approves and blesses the most horrible of all crimes—war! Do you know a single instance in the last 2000 years in which the Church made a stand against war, forbade it, threatened with excommunication those who would participate in the war? NO! In every case the war forces had the cooperation of the Church, and the ministers of Jesus *blessed* the flags, the cannons and the departing troops of every nation engaged in war, offensive or so-called defensive. I say so-called defensive because there were practically no defensive wars in the last century; they were all offensive, aggressive wars; we of the United States have never fought a defensive war; they were *all* aggressive; and yet they all received the approval and blessings of our various churches.

The influence of the Church when it takes a

strong, uncompromising stand is still enormous, and if all churches took an energetic, unequivocal, loud stand against war, excommunicating and branding as a criminal murderer, every war participant, they could prevent and stop many wars. But since the beginning of history no Church has ever done so. Always has the Church been the handmaiden, the servant of tyranny and of the war-murderers.

I therefore ask in deep and heartaching seriousness: Is it not fantastically grotesque and criminally stupid to make such a fuss over the removal of a cluster of inanimate cells, even when done to save the mother's life or to save an unmarried girl from disgrace and ostracism, to "subject those guilty of the crime to all the penalties, civil and ecclesiastical, inflicted on murderers" (Pope Sixtus the Fifth), and then to approve, actively or passively, the deliberate murder of millions of people in the full enjoyment of health?

Is it or is it not? Answer. The sacredness of an inanimate pinhead of cells which may potentially become a man, and the cheapness, the valuelessness of millions of already existing men! Don't *you* see the horrible absurdity of the thing?

P. S. "Abortion is a sin so directly opposed to the first laws of nature, and to the designs of God, our Creator, that it cannot fail to draw down a curse upon the land where it is generally practiced."—So says a Catholic bishop. Suppose one should ask for proofs? Suppose one should ask *how* the good bishop *knows* that abortion is opposed to the first laws of nature and the designs of God? I am sure there would be, there could be no answer.

CHAPTER FOUR

CASES FROM LIFE

Life is the strongest of all arguments. Actual cases from one's practice are more convincing than abstruse discussions. I have always found that the presentation of the history of a concrete case was more effective in converting an opponent to my point of view than any kind of dry argument. And I present herewith a few cases, not all necessarily from my personal practice, and not all of the most tragic, the most harrowing character. We know even of worse catastrophes. But the cases reported here should suffice to open the eyes—and the hearts—of the most callous to the perniciousness of our anti-abortion law. A law that does only harm without any concomitant or compensating good should be repealed!

1. This happened in the early years of my practice. It would not have made any difference if she had been thirty-five and homely, but she was not. She was twenty-five and pretty; very

pretty; beautiful; beautiful even on her sickbed. Did she know that she was going to die? I don't know. Of course I told her that she would soon be all right, though I knew that her chances for recovery were practically nil. She thanked me and faintly smiled. The distressed parents, in deep anxiety expressed the hope that I would not report the case. I told them that I was only asked in in consultation, that as another doctor was treating her, it was not my business, but his, to report the case to the Department of Health, if he found it necessary to do so.

Yes, you have guessed it right. It was a case of "criminal" abortion, performed by a midwife. Only when she began to have chills and fever, when the hemorrhage would not stop, did they call in a physician. They hesitated to call in a doctor for fear he would report the case to the Board of Health, and their daughter and they would be disgraced. How many people risk their health and their life for fear of a public scandal! So they tarried, and when they called in a doctor, who later called me in consultation, it was too late. And beautiful, refined, promising Miss A gave her life as forfeit to the criminal stupidity of our laws. On the death certificate, I under-

stand, the cause of death was given as pneumonia.

2. It was out of the question for Miss C to go through with her pregnancy. She had but a vague, hazy idea how it happened. But it happened and she was nearly four months gone, before she was aware that she was with child. To bring a child into the world would have ostracized her, and would have killed her old orthodox father and mother. If not killed outright, it would have thrown them into an abyss of despair, which certainly would have shortened their lives, besides causing them intense shame and suffering. No, to bring a child into the world was out of the question. Two or three doctors refused because she was too far gone, but Dr. X, badly off financially, tempted perhaps by the rather high fee, or touched perhaps by the pitiful features of the case, did induce the abortion. Something went wrong (things go wrong occasionally in perfectly normal labors); an infection set in, peritonitis developed, and a consultant was called in. Seeing her desperate condition, as a result of the abortion, he notified the police. He did not want to take any risks, to be accused perhaps of being the performer of the abortion.

Miss C's mind became hazy, and when asked the name of the man who performed the abortion she gave it.

From the time of Miss C's illness, Dr. X fell into a highly nervous state. Miss C died. When the police came to arrest Dr. X, he asked to be permitted to go into the bathroom for a moment, and in another moment Dr. X was dead. He swallowed the bottle of HCN which he carried about with him since Miss C's condition became desperate. He felt, as his wife said, that he could not stand the torture of a trial and imprisonment. He would not have been able even to obtain bail.—Two more victims of the criminal stupidity of our laws.

One might blame the doctor for carelessness, hold him responsible for Miss C's infection; but it is well to state that it is not at all certain that Dr. X was in any way careless, or was not sufficiently antiseptic. *Thousands* of women die annually when giving birth to children at full term and where the labor is perfectly normal, even exceptionally easy. We know that there is such a thing as *endogenous* infection, infection from the inside of the body, and not carried from the outside. Maternal mortality is still very high—

higher in the United States, by the way, than in other countries. But if the mother dies in a normal puerperium, nothing is done to the doctor. He will feel badly, he may lose the family and other families, but the law will not interfere with him. But if death occurs following a so-called criminal abortion and the fact is found out, fifteen years of prison stare the poor doctor or midwife in the face.

3. Just an ordinary stenographer. Hard worker, faithful to her employers, no frills and frivolities. Has had very little diversion or amusement in her life of thirty years. On her meagre salary she has to support an old invalid mother and a half-paralyzed brother. She still owes a bill to the doctor who treated him for infantile paralysis. Up to six months before "it happened" she never had a beau or a gentleman friend. And when one came along, she fell hard. Let the self-righteous and the holier-than-thous blame her, sneer at her, disdain her—but the unfortunate thing happened. It would not have been so unfortunate if it had happened in the U.S.S.R., but in any other country except Sovietland, an out-of-wedlock pregnancy is still a calamity, sometimes the worst misfortune that can befall a girl and

her family. She visited a doctor who indignantly showed her the door—"how did she dare to suggest to him that he commit murder"? The second doctor was willing, but he demanded \$200 which was altogether beyond her means. She began to buy things in drugstores, and she took such large doses that she vomited blood. She also took hot mustard baths, hot mustard injections and so forth. She succeeded in bringing on an abortion, but it didn't all come away, and she kept bleeding until she became extremely anemic. She also developed a very offensive vaginal discharge. A curetting became necessary. She is not her former self and probably never will be. The condition of her Fallopian tubes makes it very unlikely that she will ever be able to conceive. She has an almost constant pain in her side, and dragging down feeling. In short, she has joined the large army of chronic, listless, depressed invalids. All due to the criminal stupidity of our laws.

4. Miss F was a high school girl. Just seventeen years of age. It is not necessary to go into details how the misfortune happened, but it happened. She herself never suspected that she was pregnant. She didn't know what it meant. Her missing the periods meant nothing to her. She

often missed them before—two or three months in succession. She was gone five months before the mother discovered her condition. She was stunned, thunderstruck; then she became frantic. She had nobody to turn to. And she would not stand the disgrace. So she, the mother, decided to bring it on herself. She attempted it with a long darning needle. She perforated the uterus; peritonitis developed. After a week of horrible, heartbreaking suffering, poor F died. To describe the feelings of the widowed mother as she saw her beloved child die a horrible death, for which she was more or less directly responsible, I leave to an abler pen. Mine is too weak even to attempt to depict them. But she never got over it—and she never will. A nervous brooding wreck. It was lucky she escaped imprisonment. Her escape was due to the kindness of a decent, humane physician who knew what the trouble was but who was not supposed to know, and therefore was not compelled to report the case to the authorities. And the cause of death which he wrote on the death certificate smoothed things over. What good would it have done to send the poor distracted mother to the penitentiary for several years? Who would have been the better off by it?

What end would have been served? Miss F would not have been brought to life, and the mother was certainly punished enough. She is still being punished—by herself.

5. And this case reminds me of another analogous case which did not come under my personal notice, but which was in the papers. A clergyman's young, unmarried daughter became pregnant. The disgrace would have been too great if the knowledge of his daughter's condition had become public in the community over which he presided. And he was afraid to appeal to anybody. He dreaded publicity. And so the clerical father in despair decided to produce an abortion on his own daughter. Of course he had no knowledge of anatomy and he bungled the thing. The girl died; as far as I remember, within twenty-four or forty-eight hours. Her death could not be concealed, and when the officers came to arrest the father—he was expecting their coming—he took poison and died within a few hours. Two lives lost because of the criminal stupidity of our law.

6. And by association of ideas, I think of another father, a stern, religious fanatic, who when he found out that his strictly brought-up daugh-

ter was pregnant, beat her brutally within an inch of her life; he really disfigured her. She left the house—he told her to get out—and for three days they did not know what had become of her. On the fourth day they fished her out of the lake.

7-8. And Miss J, eighteen years old, when gruffly refused by one physician after another, drank an ounce of carbolic acid, and after half an hour of terrible agony, she was dead; and so did Miss L, an old maid, nearly forty years old,—and so did hundreds and thousands of other girls of various ages. Yes, the few cases above could be multiplied by a thousand, by ten thousand, and that would be far from giving us the full number of victims of our stupid, brutal, inexcusable law.

How many more victims must the Moloch on our statute book devour, before people will gain enough common sense to see that the anti-abortion law is a stupid senseless law, which does not abolish or diminish abortions, but in addition causes endless suffering and anguish, chronic invalidism, death and suicide—and even murder?

How long? How much longer?

9. Just a “common” housewife. Drudgery,

humdrum drudgery, has been her lot since her marriage eight years ago. And in those eight years she had given birth to five children, all living, and all pulling at her skirts. And now she found herself pregnant again. No, that was too much. Perhaps the excessive work and worry to make ends meet were responsible for her nervous breakdown. But whatever the immediate cause, when she found herself with child once more she lost her head, and she decided, be the consequences what they may, she would not go through with it, that even if she were to die, she preferred to be dead than to go through with another pregnancy, another childbirth, another nursing, another period of sleepless nights. Frantically she visited three or four doctors, but as all she could offer was twenty or twenty-five dollars, and as they saw her nervous, broken-down condition, they politely but firmly told her that they could do nothing for her. A friend recommended her to a woman who made a specialty of abortions, but when she approached her the pregnancy was so far gone that the lady abortionist was afraid to do anything. But she, the poor woman, was determined. Rather death than another child. So she began to go to drugstores

and to swallow different kinds of emmenagogue pills and teas. Nothing helped, not even boxes of pills sold at three dollars a box. She decided to use a darning needle which she heard would bring about an abortion if inserted deep enough and repeatedly. She did so. I shall not go into details. She lost the child of her womb—and with it her life. And five young children became motherless orphans. What will their future be? A young woman dead, and five children left without a protector—all victims of the criminal stupidity of our laws.—Poor Mrs. B, poor orphan kids.

10. And while I was writing this book, there came the tragic story of Miss Y, a young college graduate. There are plenty of physicians who out of sympathy for the girl's anguish for a good fee will undertake to induce an abortion, but not every girl knows where to find such a physician. She was from a small New Jersey town; she would not apply to one of the town's physicians. She was ashamed and afraid to do that. So without any introduction, she visited several physicians in New York. And it so happened that none of the physicians she visited would have anything to do with the case. Doctors have to be

careful. Women spies are now and then sent around trying to catch doctors who perform abortions. With each refusal she became more and more depressed, and an hour after the last unsuccessful visit to a sanctimonious physician, who evidently treated her rather gruffly, she threw herself into the Hudson from the George Washington Bridge. One of the doctors whom she visited and who could not comply with her request recognized from the newspaper description who the suicide was.

And it was stated that her old, invalid mother did not long survive the shock of her daughter's suicide, and the effect on the father was also most disastrous. Two, perhaps three deaths, and an immeasurable amount of indescribable agony. And all because of a stupidly criminal law.

11. Lizzie was but a poor servant girl. She hid her pregnancy as long as she could. When concealment was no longer possible, her kind mistress discharged her, though everybody and she herself strongly suspected that the author of the pregnancy was the son of the house; and poor Lizzie went away, nobody knew where. Later on it was found out that she was in prison. She gave birth to the child in some secluded place,

and bewildered, not knowing what to do with it, she stifled it with a pillow. She was perhaps a bit weak in her mind; she certainly wasn't very brilliant, and yet in spite of her lack of brilliance, she remained obstinately silent when urged to say who the father of the baby was. She was assured that if she would name the man, he would be made to help her out, to pay a lawyer to defend her—but to all urgings her answer was—silence.

12. A girl of fourteen impregnated by her uncle. It was not a case of rape; it was a case of easy seduction. The girl is not very bright, and she scarcely knew what it was all about. She had been unwell only once, and she did not know that she had to be unwell so soon again. Only when the size of her abdomen no longer left any doubt as to her condition, did her distracted mother, a poor widow, discover the pregnancy. What would you do, gentlemen? Permit the pregnancy to go on or have an abortion performed? You would have the girl-child go on with her pregnancy? Yes? Then I have nothing to say.

13. And here is the case of a girl of sixteen who was raped, forcibly raped, by her brother who came home drunk one night and after a

long struggle succeeded in violating her. There was nobody in the house to whom she could appeal for help. When the brother had accomplished his nefarious deed and fell asleep, she nearly brained him; but this could not undo what he had done; in a short time she found that she was pregnant.

Would you say, gentlemen, that she must continue to carry that hated fetus in her womb for nine months, then nurse him and bring him up with maternal love? Fortunately, not all the members of the medical profession are so brutal or insane. When the facts were told, there was no difficulty in finding a prominent and highly respectable physician who without any hesitation cleaned the girl's womb of its undesired and hated fruit.

14. As long as I live I shall not forget the scene that met my eyes when I entered the little bedroom in which I was told the patient was lying. Dying, would have been more correct. A young girl, about 18 years of age, completely exsanguinated, looking more dead than alive, lying in a pool of blood. The eyes were glazed, and a slight throat rattle showed plainly that she was in *articulo mortis*, that she had but a

few minutes to live. I told them that I could do nothing, and that I couldn't be in any way mixed up with the case. They asked if I couldn't give a death certificate. Of course I couldn't do that. I explained to them that the police would *have* to be notified and that an autopsy would have to be held. The necropsy disclosed the presence of a steel file in the womb which had been perforated in three or four places. It was not disclosed if the wounds were self-inflicted or caused by a male or female bungler. If the household knew, they kept the knowledge to themselves. I learned that the dead girl was a very promising singer. Another victim to our brutal abortion law.

15. And I know of a case of a young woman abandoned by her false fiancé in a pregnant condition. She tried and tried to get rid of the pregnancy but couldn't. She gave birth to the child. But she was so distracted, she was in such a desperate condition—the details are too harrowing—that she killed the child when it was a week old. And the deed so preyed on her mind, that a few days later she was found hanging from a rafter in an attic. She had been dead three or four days.

16. And another case was related to me by a person who was familiar with all the details. Also a case of abandonment by a man who professed deep love for the girl and promised to marry her. When he disappeared she had a nervous breakdown. On regaining some composure she tried to rid herself of the condition in which she found herself. She took different drugs and patent medicines, with no effect. She then went to a midwife, who after several visits told her she was all right, that she was no longer pregnant. But the pregnancy continued, and when she saw that she was deceived by the ignorant midwife, it was too late to do anything about it. She was too far gone. She hid herself, and had the baby, practically alone, attended only by a poor old aunt. One evening, two or three days later, she wrapped up the infant, carried it out and left it in some yard where it was found dead a day or two later. When she learned of the child's death she went insane, and is insane to this day. Confined to an asylum, she spends most of her time rocking an imaginary baby in her arms.

CHAPTER FIVE

THE MEANS USED TO INDUCE ABORTION

A curious and tragic chapter. If one wants to know the desperate condition in which some women, married and unmarried, are when they find themselves pregnant, it is but necessary to contemplate the desperate means which women use in their attempt to get rid of their pregnancy. One woman for instance was advised by a neighbor to give herself an injection of *sulphuric acid*. The horrible pains she experienced it is easier to imagine than to describe. The vagina became enormously swollen and inflamed, then began to slough, then the walls grew together so that the opening of the vagina became quite closed. When labor pains commenced, a doctor was called in. Finding the vagina closed, he had to cut it to remove the fetus, which was dead. The woman, who was in a desperate condition, died soon after the doctor was summoned.

Another woman gave herself an injection of pure carbolic acid; she died soon after in terrible

agony. A third woman was advised to insert two or three tablets of bichloride of mercury. Poisoning set in and she died five days later. Another woman who tried to abort herself died from peritonitis and pneumonia. The autopsy disclosed that she used a steel rib of an umbrella; but instead of penetrating her womb she perforated her diaphragm and lung. Peritonitis and pneumonia were the result. At the autopsy of another woman wounds were found in the vagina, uterus, bladder, peritoneum, the left kidney and the stomach. A bloody brass poker was found in the room. The husband claimed that the wife herself caused those wounds trying to abort herself with the poker. The prosecution claimed that it was the husband who tried to bring on the abortion as it was physically impossible for the woman to inflict such wounds on herself. The defence claimed that it was. The husband for the lack of positive evidence was acquitted. The additional sad part of the story is that the woman was found not to have been pregnant at all. She only thought she was pregnant. I might add here in passing that many women take medicine and have themselves curetted for alleged pregnancies when they are not pregnant at all. One dead

woman was found with a wooden skewer in her womb. Long darning needles and lead pencils have been favorite implements for self-induced abortion.

Many women kick themselves in the abdomen or have the man kick them, take long exhausting walks, jump from great heights, run up and down stairs numerous times, with occasional success, but mostly in vain.

The tons of tansy, pennyroyal, savin, rue, ergot, quinine, camboge, colocynth, calomel, wormwood, cottonroot, hellebore, etc., etc., which the poor women are taking, endangering their lives and ruining their health, sometimes irretrievably, are in my opinion an additional indictment of our anti-abortion laws. The women would not have to have recourse to such drugs, and to the still more deadly poisons, such as phosphorus (matches), arsenic, diachylon or lead plaster (a prime favorite in England), if the induction of an abortion by a qualified physician—and a qualified physician only, as is the case in Russia—was a perfectly legitimate procedure.

CHAPTER SIX

SEND ME SOMETHING TO BRING ME AROUND

The primitive medicine men were considered by the primitive peoples as miracle men, magicians, and the faith of the people in the magic powers of pills and potions still persists. The letters and the oral requests which we doctors receive are pathetic in their faith and naïveté. "Doctor, I am a month overdue, I am three months gone, I find I am in the family way and I just can't afford to have another baby, I have missed my menses, etc., etc.—won't you please send me something to bring me around?" And those poor suffering, despairing women are firmly convinced that all it is necessary for them to do is to swallow a few pills or capsules or a few spoonfuls of medicine, and everything will be all right as if they never had been pregnant. And they lose their admiration for the doctor whom they had considered so humane because he has failed to send the medicine they so prayerfully and heartbreakingly begged for. They are

convinced that the doctor did not send the medicine because of lack of sympathy, or for fear of breaking the law and risking trouble, and not because there isn't any such remedy that taken internally can be *relied* upon to bring about an abortion.

Now, it is necessary to tell the truth and to state plainly and unequivocally: There is no remedy, in or out of the Pharmacopeia, there are no patent or proprietary herbs or pills which can be *depended* upon to bring about an abortion. If there was such a preparation, its proprietor would in a short time become a multimillionaire.

Abortifacient means abortion-producing; a remedy which when taken internally will bring about an abortion. Now, there is no such thing as an abortifacient in the sense that we have cathartics or remedies that move the bowels, diuretics or remedies that increase the secretion of the urine, hypnotics or remedies that induce sleep, etc. In the case of the remedies just mentioned we can rely, we can be certain that they will produce the result expected. There is no such certainty in the case of the so-called abortifacients. In other words, there is no drug or combination of drugs which can be *relied* upon to

produce a miscarriage or an abortion. I do not mean to say that we have no drugs that possess a *tendency* to congest and irritate the uterus and thus to help occasionally to bring about the premature expulsion of the embryo; but there is a difference between a *tendency* to produce a certain effect occasionally, and a dependable *certainty*. And even that tendency generally manifests itself only during the first days or weeks of the pregnancy.

If this is the case, why do women have such a firm faith in the existence of infallible abortifacients? There are two reasons.

First, some women do abort very easily. Even a slight nervous shock will induce an abortion in them. I know a woman who can always abort herself by jumping off half a dozen times from a table.

Just as it is easy in some women to induce an abortion, so it is impossible to do so in others (except instrumentally). We have the report of a case of a pregnant woman who fell out from a third floor window and fractured her skull and in whom the pregnancy continued nevertheless; also of another woman who was thrown out of a car, sustained a compound fracture of the thigh,

and remained abandoned in the snow for several hours; her pregnancy continued uninterrupted. A still more unique case is that of a pregnant woman who received a stab wound which *perforated the uterus* and in whom the pregnancy was nevertheless not interrupted. In a certain train wreck (reported by Dr. Schaffer) several pregnant women received injuries in the abdomen, but no abortion occurred, while in the train following the mere shock induced abortion in several women who were not injured in any way.

Here are some other cases of this character.

She was a thin, delicate little woman. She missed her periods and she was sure she couldn't be more than two weeks overdue. And this is what she did. For five nights in succession she took hot mustard baths and she took them so hot that each time she nearly fainted and came out of them like a broiled lobster. No effect. She then took a box of pills which cost her two dollars. No effect except causing diarrhea. She then took two boxes of capsules which upset her stomach and made her fearfully nauseated. No other effect. She then ate one-half a colocynth which made her terribly sick, causing a bloody diarrhea. She had to stay in bed for three or four

days. She then took burning vaginal injections with some ipecac in them. No effect except making her feel raw so that she needed large amounts of cold cream. She then took *secale cornutum* (ergot) and *radix gossypii* (cotton root). No effect except giving her a headache, making her sick to her stomach and completely destroying her appetite, so that within a very short time she lost nearly ten pounds. She was then told that long walks might be efficient. She took walks six and seven miles at a time, coming home more dead than alive. No effect. She then heard that jumping off a table is a very efficient means. She did it a dozen times in succession so that she was completely fagged out and out of breath. Seven and a half months later she gave birth to a perfectly healthy, well-formed boy weighing eight pounds.

This case shows how worthless and injurious the various popular abortifacient drugs and methods are. And this case brings to mind some other cases reported in the literature.

A case reported by Brillaud-Laujardière illustrates that the severest violence may be without any effect in inducing abortion. A farmer who was responsible for the condition of a servant

of his household conceived the idea of riding horseback with her in order to bring about an abortion, and pushing her off when the horse was running at great speed. This he repeated several times. The woman gave birth to a perfectly normal infant at full term.

Hofmann reports that another farmer, under similar circumstances, brutally kicked the woman in the abdomen repeatedly until she lost consciousness. The pregnancy continued to full term, notwithstanding. In another case of Hofmann's a woman allowed a heavy door to fall upon her but the pregnancy was not affected.

Dr. Guibout relates that a German woman, living with her husband in California, being pregnant, wished to return to Munich, her hometown, to be delivered. The train in which she traveled through Panama collided with another train. Threatened abortion required her to take a rest. She took a steamer and after a very rough passage reached Portsmouth. From there she went to Paris. Here she fell down a flight of stairs in the hotel where she was stopping. Again she was threatened with abortion, but after a rest was in good condition and continued her journey. She finally reached home, and was delivered at

full term of a normal infant. Vibert reports the case of a woman who was in a train accident which injured her severely, killed two of her children, but did not affect her pregnancy. She was delivered at the proper time of a normal baby.

And so when the easily aborting woman tells her friend that such and such a remedy is invariably effective in her case, the faith in the remedy spreads, and the fact that in the case of the other woman it failed signally only serves to dampen, but does not abolish that faith.

The second, more important reason is this. A great many women, married and unmarried, become frightened when their period is a day or two overdue, and they start taking the various reputed abortifacients. As they have not been pregnant at all, the menses arrive in a day or two and they are sure that it was the pills or capsules or what not that brought them on. And so those pills, capsules or herbs receive undeserved credit.

To summarize: There is not a single drug or combination of drugs which may be *relied* upon to bring about an abortion or miscarriage. Certain drugs such as quinine, apiol, manganese

dioxide, potassium permanganate, oils of pennyroyal (hedeoma), tansy (tanacetum), savin (sabina), rue (ruta) etc., taken in conjunction with cathartics and hot baths or hot mustard footbaths may bring about an abortion during the first few days or weeks of pregnancy, particularly in women who abort easily. In the great majority of women all those things will have no effect even if taken during the first few days. And in such cases the only *sure, certain and safe* way is to dilate the cervix and remove the contents of the uterus. If done prior to the third month, and that is when it should be done, the whole thing can be performed in ten to fifteen minutes.

During the first few days the instillation, beyond the internal os, of a few drops of Lugol's solution or Tinctura Iodi by the means of a Brown syringe is generally efficient and sufficient. But of course that can and should be performed by a physician only.

EMMENAGOGUES, ABORTIFACIENTS AND ECBOLICS

I trust I shall not be misunderstood. I do not mean to imply that we possess no drugs which

stimulate menstruation, increase the amount of the menstrual flow when it is scanty, or even bring about the menses which failed to make their appearance. Decidedly we do possess such drugs. But these drugs are *Emmenagogues*. And as some confusion on the subject seems to exist even in the minds of some members of the medical profession, a little explanation will not be out of place. Emmenagogues are remedies which will stimulate and bring about menstruation which has failed to appear at a regular period for any cause, *excepting* that of pregnancy. Such drugs are apiol, savin, rue, tansy, iron, quinine, etc., in short all those drugs which the laity and many physicians take to be abortifacients. If the menses have failed to make their appearance because of a cold, a shock, worry, or severe anemia, —those drugs will unquestionably help. And, the truth must be said, if the pregnancy is but of a few days' duration, they may also help. For when the pregnancy is of but recent date, the mucous membrane of the uterus is in about the same condition as it is in ordinary menstrual retention. But when the fetus is firmly and widely attached to the endometrium the condition is quite different, and the emmenagogues have little or no

effect. At any rate, the effect can never be counted upon, relied upon.

We also possess Ecbolics, remedies that produce powerful uterine contractions which help to expel the fetus. But that is only the case after the uterus has commenced to contract spontaneously, that is during normal labor or a spontaneous miscarriage. Then such drugs as ergot or pituitrin are of decided value and can be depended upon to produce the effect desired. But they cannot be depended upon to *initiate* uterine contraction—unless given in doses which may prove dangerous.

To resume briefly: We possess fairly dependable Emmenagogues, we possess powerful Ecbolics, but we do not possess *any* reliable abortifacients. The only reliable abortifacient in pregnancies more than a few days old is the uterine dilator and curette. The injection into the uterus of certain pastes has been suggested, and while efficient in the majority of cases they have proved too dangerous. Several deaths have resulted from their use.

THE BEST EMMENAGOGUE COMBINATIONS

One of the best, i.e. simplest, least injurious and generally effective emmenagogues is the following combination:

Aloes	gr. iss.
Iron sulphate, dried	gr. ii
Asafetida	gr. ii
Oil of pennyroyal	min. ss.
For one pill. Tales doses	XX

Two to three pills 3 times a day (that is 6 to 9 pills a day) for two days as near the time of the expected menstruation as possible.

Another excellent though more complicated formula is the following:

Ferri sulphatis exsic.	gr. ii
Mangani dioxidi	gr. ss.
Cupri sulphatis	gr. 1/12
Arseni trioxidi	gr. 1/60
Aloes	gr. iss.
Asafœtidæ	gr. iss.
m. f. pil. vel caps. No. I.	
D. Tal. Dos.	XX

S. Pil. ii-iii ter in die post cibos.

A good apiol preparation is also quite often efficient.

Yohimbin, which is sometimes added to emmenagogue pills to make the prescription more expensive and more mysterious, is in my opinion of no value.

In addition to the above prescriptions five or ten grains of quinine sulphate in capsules may be taken at night. A hot bath or a hot mustard footbath taken in conjunction with the above is a good adjuvant.

As a rule the above combination will be found effective in ordinary amenorrhea.

Some women who are very susceptible to laxatives must be cautioned that after taking a few of the above pills or capsules a diarrheal condition may set in. But this cannot be helped, and is easily remedied with a few substantial doses of bismuth subnitrate (30 to 60 grains to the dose).

I said that an abortion should be performed prior to the end of the third month. This is necessary both for hygienic and ethical reasons. Hygienically, medically, an abortion performed during the first, second or beginning of the third month is quite a different matter from one performed in the fourth, fifth or sixth month. And

if the difference is great medically, hygienically, it is still greater ethically. I know there are radicals who see nothing wrong in performing an abortion even in the seventh, eighth or ninth month, but while they are welcome to their opinion, I beg to disagree. Performing an abortion during the last two months of pregnancy is too much *like* infanticide, and my radicalism does not go so far as to justify infanticide.

And there is no reason why a woman who, for various reasons, must have an abortion performed should wait until after the third month. Only a moron or feeble-minded imbecile doesn't know that she is pregnant after missing two or three periods; and *morons and imbeciles should not be allowed to get pregnant at all: they should be sterilized*. It sometimes happens that a girl is in desperate search of a person willing to perform the operation and is unable to find one until she is in the fourth or fifth or sixth month. That is true. But when abortion is legalized, this will of course never happen; when an abortion becomes necessary, the woman or girl will be able to have it performed during the first weeks of pregnancy. And she will escape the necessity of stuffing herself with noxious and generally in-

efficient drugs or having recourse to incompetent bunglers or exorbitant professionals.

OVARIAN PREPARATIONS AS EMMENAGOGUES

That we are a hysterical nation is known the world over. Today we deify a man, tomorrow we stone and bury him. And we are faddists to the *n*th degree. No sooner is a new preparation announced than we fall over each other, rushing to be the first to try it. Our hysterical enthusiasm over violet rays, organotherapeutic preparations, hormones, glands and glandular extracts, and now the vitamins A, B, C and D and E (and we shall soon probably have F, G, H, etc. to the end of the alphabet) tells the same story. Because thyroid preparations have proved so efficient in thyroid *hypofunction* (myxedema and cretinism), it was taken for granted that ovarian preparations would prove efficient in ovarian *hypofunction* (amenorrhea, scanty menstruation; and even complete stoppage of menstruation because of pregnancy).

In spite of the fact that the results have not justified these expectations, quacks have continued to recommend them, and there are several preparations on the market supposed to be ef-

fective in inducing abortion. And those preparations are very expensive—and they are as useless as they are expensive.

The quacks and the ignorant have overlooked the fact that while thyroid preparations are not destroyed in the stomach, ovarian preparations are. And our only hope to obtain effective ovarian preparations is to obtain soluble crystalline hormones, which can be *injected* the same as insulin is. (We are now getting such preparations.)

The above long statement is merely a preamble to my injunction: Do not buy or prescribe ovarian preparations in pill, tablet, capsule or liquid form—in short in no form intended to be administered by mouth—in the hope that they will act as abortifacients or even as emmenagogues. They will not expel the fetus. All they will expel is the money from your purse.

CHAPTER SEVEN

THE DANGERS OR ALLEGED DANGERS OF ABORTION

Aren't abortions dangerous? Do not many women die from abortions? The slightest operation *may* prove dangerous. The paring of a corn may result in a fatal infection. The extraction of a tooth in an unsuspected hemophiliac may result in death from uncontrollable bleeding. The stepping on a nail may result in fatal tetanus. The passing of a urethral sound may result—it has happened right here in New York—in instantaneous death. Infection, chronic invalidism and death lurk behind any abortion performed in a bungling, incompetent, non-aseptic, clandestine manner. And it is just because this is the case that we demand the abrogation of the abortion law, so that the operation may be performed, when necessary, in a clean, scientific manner by a competent physician. And when so performed, *there is less danger in an abortion than in normal labor.*

The maternal mortality following normal labor

at full term is much greater than that following artificial abortion performed by physicians during the first three months. Bear that in mind. If as many deaths proportionately followed induced abortions as do normal labors few physicians would dare to undertake the former. Death following a normal labor results simply in unpleasantness for the doctor; death following an abortion may have as a result fifteen years of prison. But performed properly the operation is practically free from any danger. They claim in Russia that in a series of sixty thousand abortions they had only three deaths—a record unequalled by *any* normal labor statistics.

Dr. Karlin of Leningrad has stated that in the large cities where the abortions are performed in hospitals exclusively there are *no longer any deaths*, while any pathologic after-effects have been reduced to a minimum. In the small towns and villages, however, deaths and illnesses are still common.

If in Bavaria out of 530 cases of puerperal fever following *normal* birth there was a mortality of 106 or 20 per cent, while in 113 cases of puerperal fever following abortion the mortality was almost 50 per cent, the significance is nil.

Taking into consideration the circumstances under which "criminal" abortions are undertaken, the lack of asepsis, the ignorance of the midwives, the fear and nervousness in both the patient and the operator, the greater mortality following criminal abortions, particularly so in former times, is to be expected. At the present time the professional abortionists are skillful, careful and aseptic and have practically no casualties. I have been told of a professional abortionist who boasted that in fourteen thousand abortions that he had performed he had not had a single death or even a single case of morbidity. And I do not believe that he made the statement for self-advertising purposes, because when he made that statement he had retired from practice and was engaged in enjoying a "well-earned" rest abroad. He considered himself a philanthropist, a humanitarian, a benefactor.

Why do I try to prove that abortion is not as dangerous a procedure as it has usually been painted to be? Is it for the purpose of encouraging abortion? Nonsense, of course. Abortion is an evil which should be avoided whenever possible. But I believe in truthful statements. I have never believed in fear as a factor for making people

good. And besides it is necessary that the girl or married woman who for some reason sees herself forced to have recourse to an abortion should not approach the slight ordeal with fear and trembling, which fear and trembling may exert an unfavorable effect on her. She must be assured—which is the truth,—that an abortion properly performed is a very much simpler matter than natural labor at full term.

The truth is generally a safe guide.

ABORTION AND STERILITY

The question is often asked: Doesn't abortion generally lead to sterility? If an abortion is accompanied by some inflammation or infection, sterility may result. But this is also true of normal labor. Otherwise we would not have thousands and thousands of cases of one-child sterility. There are women who would sacrifice "anything" to have a second child; but they can't, because the first labor was accompanied by some inflammation which sealed up the Fallopian tubes. Inflammation from any cause may do that. But if an abortion is performed properly and is not followed by any inflammation or infection, sterility is no more likely to follow than it is a

normal labor. How many women are there who have undergone three, four, five or half a dozen abortions? This does not speak in favor of sterility following abortion. And we know of one woman who claims—and there is no reason to disbelieve her—that she underwent nineteen abortions in her life; and she has not reached the menopause yet.

So the answer to the question is: No, not unless followed by inflammation or infection; and in a properly aseptically performed operation this should be even less frequent than after a normal labor.

CHAPTER EIGHT

ABORTION AND INFANTICIDE

It is a well-established fact that among many primitive races the killing of newborn or young children was quite common. Among some, infanticide was not only permissible, but obligatory. I am not referring to those utterly savage tribes who, like some negroes in Africa, bait lion-traps with their own children, or who kill their babies and eat them after roasting them. Among the Tasmanians the birth of a child was welcomed—because they could roast them and eat them! Those tribes stand on the lowest rung of civilization's ladder. But even more advanced, non-cannibalistic tribes commonly killed their superfluous children. Thus in the Hawaiian Islands all children after the third or fourth were strangled or buried alive. At Tahiti the fathers suffocated their newborn, while the chiefs were *obliged* to kill all their female children. Twins were generally killed because the mother could not suckle both. Even in India, among the aristocratic Rajputs, girl-babies were murdered—

by poison (the mother's breast being smeared with opium), or drowning, or suffocation—because the marriage of daughters was a ruinously expensive matter. Warrior or hunter tribes found too many women a nuisance and a hindrance, instead of a help as they became in agricultural communities, and therefore ruthlessly murdered their baby-girls.

Religion, which has been responsible for the deaths of millions of adult men, has also been directly responsible for the deaths of numberless children. For many religions demanded sacrifices of human beings, and so children were burned alive in the worship of the Canaanite fire-god, Moloch. In India thousands and thousands, perhaps millions, of children were thrown alive as a religious sacrifice into the river Ganges. The alligators fed on them and were considered sacred.

In Sparta and in several other Greek and Roman communities the killing of infants is supposed to have had a eugenic motive: only the feeble and deformed children were exposed to the elements until they died. This infanticide was approved by both Aristotle and Plato and was made obligatory by the state. Infanticide of the

weak and deformed is still being practiced to the present day by the Eskimos and Kamchatkans.

We are horrified at the thought of the deliberate murder of a living child, and we console ourselves with the conviction that infanticide is a thing of the past, that it is no longer known in civilized countries. If it is practiced at all, then it is only the case among savage tribes in dark corners of the earth. So we think. Alas, it is not so. The public would be horrified if it knew the extent to which infanticide is still being practiced at the present day in our very midst. We are no longer so brutal, we do not dash out the brains of young children as Darwin saw an Australian father dash the brains out of his child because he upset a fish basket; no, we kill them gently, painlessly, when they are but a few days old. An overdose, or several overdoses, of paregoric; gently suffocating them with a pillow, or by "overlaying"; removal of the ligature from the navel, as soon as the doctor has left, so that the child may bleed to death; putting it in a bath into which a bichloride tablet has been "accidentally" dropped; exposing it naked to a cold draught so that it may get pneumonia; these

horrid things are still being practiced. And how many newborn infants are dropped into privies, thrown into ash cans, left in empty lots, on door steps!

It is in order to do away with these murders of living children, which are wrong in themselves and which must leave terrible scars on the consciences of their perpetrators, that we advocate the legalization of abortion. Is it not better to permit the removal of a few inanimate cells, or of an embryo a few days or a few weeks old than to let that embryo go to term, to be born a living child, only in order to be done away with? I leave the answer to the reader.

CHAPTER NINE

AND HERE I WILL TAKE THE LIB- ERTY TO TELL THE READER THE STORY OF BIRDIE AND HER BABY

It was a beautiful Easter Sunday, and as the office was beautifully empty, not a patient being present and none being expected, I decided to go out with my young wife for a ride. No, not in a machine, but just in a trolley car, into some suburb. I remember it as if it were yesterday. We had put on our hats, closed the door of the apartment and started—when ding, ding, ding went the bell. A slightly perturbed gentleman appeared and asked me to please run across the street. A young lady whom he was taking to church was suddenly taken with cramps, and he brought her in to her sister's across the street. He saw that we were dressed, ready to go out, but he begged me to come along with him. It would take me but a few minutes to see what was the matter with her and to prescribe for her. It seemed, he thought, a bad attack of indigestion.

I asked the little wife to go back to the apartment and wait for me. It probably will not take more than five or ten minutes. Accompanied by the gentleman I briskly went to the indicated number, rushed up the one flight of stairs, and in a moment I was beside the patient's bed.

"Here, Birdie," said the man, "is a doctor; he'll fix you up in a minute."

The patient was a pretty girl, apparently about twenty years of age—I learned afterwards that she was only eighteen—and evidently suffering great agonies. Before attending to the patient, I involuntarily cast a glance around the room.

Besides the patient there were three other people in it. The first one that attracted my attention was a woman of indefinite age—she might have been anywhere between forty and sixty, but so untidy, so slovenly, that the name slattern got fixed in my mind as a synonym for that woman, whose name was Lizzie, and I never think of her otherwise than as the slattern Lizzie. The next figure that came within my vision was a pleasant looking gentleman in the middle thirties, well dressed, in fact too well dressed. He was semi-reclining on a couch and reading the Sunday

paper. He had a vapid, rather dissipated face, but this I did not notice at the time—I noticed it on my subsequent visits. The environment and the people in it were not very reassuring, and I would have felt rather discouraged or disgusted at having been called into such a house, but then I noticed the third person in the room, who proved to be Birdie's sister and the reclining gentleman's wife. She introduced herself as Mrs. Ellis, and her face was so fine, so confidence-inspiring, so serious, not to say melancholy, that I felt that here, at least, was one person who was not in the same class with the other people in the room, who could be appealed to and relied upon in an emergency.

As I was classifying the various persons in my mind—it took but a minute—I was recalled from my meditation by a half-stifled scream.

I put my hand on the young girl's abdomen—and stood for a moment dumfounded.

“Why didn't you tell me she was going to have a baby?” I addressed the man rather sternly. I thought that fearing that I might refuse to go to a confinement on an Easter Sunday, particularly to strangers who had not engaged me previously, he had used a ruse to bring me to the house,

knowing that seeing the patient in actual labor I would be unable to leave her, and willingly or unwillingly would be forced to stick it out to the end. I felt annoyed and could not and did not care to conceal my annoyance. Nobody likes to be tricked into doing something, even if the something is necessary and unavoidable, samaritan and humanitarian.

Had I taken a dynamite bomb from my bag and thrown it among the people the shock could not have been greater than that produced by my words. For a moment all stood petrified. I could see that of all those present nobody suspected the real state of affairs. The sister alone seemed to have just gotten a suspicion of the kind of cramps Birdie was suffering from. The expressions on the faces were worthy of a painter's brush. On the face of the landlady, who had just entered—the place was a boarding house—there was an ugly sneer; the sister began to shed tears, the gentleman who called for me wore an expression of anger, consternation and incredulousness.

“Young man,” he addressed me—I confess I was very young and very slim during the first years of my practice—“young man, are you sure you know what you are talking about? That's a

nasty mistake to make. That young lady is my fiancée; we are not married, and she can't be having a baby."

I saw that the man was highly agitated, and so I merely said: "I am sorry, but the baby will be here in probably less than an hour. And now you all get out of the room—all except this lady" (the sister).

Here Birdie, whose face was contorted with pain and who, I could see, was using superhuman efforts to be quiet, could contain herself no longer, and let out an unearthly scream. Evidently the pain was one of those labor pains of which we men have no conception—"praised be Thou, O Lord, that Thou hast not made us a woman."

At this point the landlady, I regret having to report, became very ugly. She insisted that Miss B. must leave her house at once. Her house was a respectable house, she will not permit strange unmarried women to come to her place and have babies there, she will not stand for it to have her disturb all the boarders with her screams. I never could understand where, young and inexperienced chap that I was, I got the courage to approach the termagant, and tell her to get out

and be quick about it, or I would report her to the Board of Health and we would hold her responsible for any injury that might be suffered by the young woman; that I was now in charge of the case, and nobody dared interfere with my instructions or injunctions. The dear landlady became as silent as a clam and silently left the room. I returned to Birdie who was again using extreme efforts to stifle her screams.

“Don’t you pay any attention to anybody, Birdie,” I told her. “You just scream all you want, if it will help you. And it will.”

My heart became a mass of molten sympathy which all ran out towards Birdie. And she felt it and was grateful; the pet name Birdie came as naturally and spontaneously to me as if I had known her familiarly for years.

I remember that as a medical student, when attending confinements for the Lying-In Hospital, it fell to my lot to deliver one unmarried mother; also a young girl, about twenty. I shall never forget it. Everybody in that wretched house treated that poor girl as a criminal pariah. Looks of hatred and animosity and curses were hurled at her, while she was undergoing the tortures of labor pains. Only one Irish

woman from the next floor petted her and told her not to mind and that everything would be all right.

It is a horrible business when you think of it. To go through any labor is no picnic at best. To go through a first labor is even less of a picnic. But the knowledge that your loving husband, your mother and father, and perhaps grandparents, and other relatives are full of sympathy and love, and are outside anxious awaiting the result, does lighten the burden, does make the pains easier to bear. And then the desire for a baby—if it is a desired baby—the satisfaction of the maternal instinct, the dreams of the future—all these things make legitimate labor easier to bear.

But take the poor illegitimate mother. Physically stabbed and contorted by never-before-experienced cruel pains, her soul is on the rack by the knowledge of the disgrace she has brought upon herself and her family, whose glances of hate and contempt sear her like hot irons, and the thought of the future of the fatherless waif that will soon be brought into a hostile and loveless world caps the climax of her misery. And it is for that reason that the few times it fell to my

lot to deliver unwedded mothers, I treated them with even greater sympathy and consideration than I did legitimate mothers. The former needed it more. Birdie felt at once that she had a staunch friend in me—how quickly sufferers feel when they have a real friend—and she did just what I told her to do. And in an hour the baby was in my arms—a big, bouncing boy, crying for all he was worth. Whether he cried because he resented being brought into this wretched world or because he wanted the whole world, I do not know.

During all this time the fiancé was walking to and fro in the hallway. It seemed to me that he was still doubting; still hoping that perhaps I had made a mistake. But when he heard the unmistakable wail, or rather lusty imperious cry of the newborn baby, his doubts vanished. He came in to get his hat, and disappeared. And Birdie saw him no more.

He called on me the following day to tell me that he hoped I did not suspect he had anything to do with that baby. He was a respectable, God-fearing man and he thought Birdie was a respectable girl; and he treated her with the respect due a decent girl; all the time he was

engaged to her he did not even as much as kiss her. But of course now he wanted none of her, and did not care to have anything further to do with her. And he went away; and this was the last of Birdie's fiancé as far as this story is concerned. And so we will go back to Birdie.

The baby was a most healthy kid and grew from day to day. Birdie had plenty of milk but the kid never seemed to have enough. "Terrible little glutton."

Everything ran smoothly. The landlady was promised a few dollars for her extra "trouble" and became decent. The woman around the house, the slattern Lizzie, who had had six children, four of whom she buried, and was therefore considered a competent nurse, used to come in and bathe the baby.

There was an unpleasant moment when on the seventh day, I had to fill out the birth certificate. When it came to answering the question: father's name, Birdie's reply was: "There was no father." "You need not tell me if you do not wish to," I told her, "or you can give some fictitious name. Or don't you really know who the baby's father is?"

"I am telling you there was no man. I don't know anything about it."

And here is the really peculiar part of the case. In spite of the complete confidence that Birdie reposed in me, for, as will be seen, I stood by her in a very difficult moment, in spite of the gratitude she professed to feel toward me, and I have never doubted her sincerity, she maintained persistently, unshakably, that she had never had intercourse with any man, and up to the very minute that I said she was going to have a baby she did not know, she did not even surmise or suspect, that she was pregnant.

"You know I would not lie to you. But I never was with a man, and I don't know how this happened." And to this she stuck.

And I am going to surprise my readers by telling them that I finally came to believe her. Of course the pregnancy was not brought about by the Holy Ghost. I have an idea who the culprit was; from certain facts and behaviors I came to a pretty definite conclusion that the guilty party in this case was the sister's husband, a rather irresponsible and loose-living gentleman. Birdie slept a few times in her sister's house, sometimes when the sister was away. And she

was not too prudish to take a drink of whiskey, of which the good and gay brother-in-law always had several brands on hand. And it is rather certain that one night she took quite a few drinks. And whether she really was too narcotized to remember anything that took place, or whether she got an attack of amnesia in the Freudian sense—according to which we repress into the unconscious and forget all unpleasant events—or whether it was a case of sublime loyalty to her sister and brother-in-law—does not matter. A man there was, of course, but she did not remember, or did not want to remember or did not want to tell of his existence. But that she really was not aware of the fact of her pregnancy to the very last moment, this I believe.

“Do you suppose, if I had thought I was in the family way, I would not have told my sister, would not have gone to see a doctor or a midwife? I know a woman who did an abortion on my sister. I would have gone to her.”

“But didn’t you notice that you didn’t menstruate for nine months?”

“I never bothered about that. I was never regular. I often went two or three months without my monthlies. Once I went six months.”

“Didn’t you feel the movements of the baby?”

“No, I didn’t. Only once or twice. And then I thought it was gas. And do you suppose I would have gone out with Mr. F. (her fiancé) if I thought I was going to have a baby? If only he had not been present when I had the baby, everything could have been made all right. The baby could have been put away somewhere and he would never have known. And now I have lost him, forever.”

Birdie’s arguments seemed plausible, and whether it sounds credible or not I must report this as a case in which a girl went to term with a big child without being aware even once that she was pregnant.

The baby was growing from hour to hour. Birdie’s breasts were heavy with milk, and the kid was suckling day and night. He never seemed to have had enough, and the young mother was glad to be relieved of the excessive fluid, would put him to the breast at the first sign of restlessness, at his first cry. She was naturally anxious not to disturb the house with the baby’s screams, for scream he would, if he did not get his grub immediately.

I called the people’s attention to the fact once

or twice how remarkably the boy was growing and developing, but I noticed that this comment of mine called forth neither joy nor confirmation. It would have under ordinary circumstances. But then I recollected that this was an "illegitimate" baby which would have to be given away, which would have to be parted from its mother; and I understood why there was no joy at my remark about the baby's remarkable well-being. No, decidedly there was no joy; rather there was embarrassment and consternation.

On the fourth or fifth day after the confinement Mrs. Ellis, Birdie's sister, asked me if I knew some foundling asylum, some farm or private woman with whom the baby could be left. Birdie had no money at all, nor had she, but her husband was willing to pay a reasonable sum to anybody who would take care of the child. I was sorry, but I did not know any place or person to whom the child could be entrusted.

I might state here that Birdie's parents, very religious Methodists, were old and feeble. The father was near seventy, the mother a little over sixty. Of course it was important that the parents be kept in complete ignorance of the accident that happened to their youngest child. The shock

would kill them, so Mrs. Ellis said. They lived in another part of the town, seldom went anywhere, and on the following day Mrs. Ellis went over there, told them that Birdie had a bad cold and would stay with her for a few days. Perhaps she would go with her to Atlantic City for a week. The parents took it in good faith and suspected nothing. Neither at that time, nor any other time. I afterward had occasion to treat Birdie at her home, and her good parents, I could say, never had the slightest suspicion that anything had happened to their favorite daughter.

When I said that I knew nobody to whom to entrust the baby, there was great disappointment; but the houseworker said that she knew somebody who for so much per week would take care of the baby. Of course she wanted something for her trouble; a mercenary creature that Lizzie was. She evidently had a very hard life, and was greedy for a dollar.

It was interesting to watch Birdie while the talk was going on about getting rid of the baby. Sometimes it would seem to me that she felt very badly about the matter, that I could notice tears in the corners of her eyes, and then again she would seem indifferent or eager that he be taken

away. I imagine now that the knowledge that to have the baby with her was out of the question made her wish to be through with the matter as soon as possible.

The customary number of days for a doctor to visit a woman in confinement is nine; the first four days I visited Birdie faithfully twice a day; after that once a day. Her case was perfectly normal; no pains anywhere, no excessive discharge, the womb well contracted and not a quarter of a degree of temperature above the normal.

When on the seventh day I got ready to fill out the birth certificate, both Birdie and Mrs. Ellis began to ask to let it go; why must a birth certificate be filled out; nobody would know if I did not send one to the Department of Health, etc. I was sorry, I told them, but that could not be. The law demanded that the attending physician report every birth and I could not break the law. Of course I understood—or thought I understood—their anxiety not to have the case reported. The child being illegitimate, they did not want the mother's name made public. But I assured them that the records were confidential and not accessible to the general public. Only one thing I agreed to—to make a slight change

in the mother's name so that her identity would be concealed. The father's name was given as the long-suffering Smith, the boy was named John—no fancy, romantic names for illegitimate babies—and the certificate went on its way to the Board of Health where it remains up to the present day.

On the ninth day Birdie and her baby, being in the best of health, I bade everybody goodbye, got my fee from Mr. Ellis, and went to make the rest of my not very numerous calls.

In those days we used bichloride as an antiseptic more than we do today. I douched Birdie with bichloride solution, and I would not think of touching her to change the pad, etc., without scrubbing my hands with bichloride. Before leaving I left three or four bichloride tablets with Birdie, telling her to take a douche every two or three days—one bichloride tablet to four quarts of water; and never touch herself down below without washing her hands with bichloride; but to be careful, as the stuff was poisonous. The box I left the tablets in was marked Poison, on top and bottom.

The next morning Lizzie the slattern rang my office door bell, and when the door was opened

to her, she called out: "Mrs. Ellis wants you to come over right away. The baby is sick, very sick." And she looked peculiar as she shuffled away. I got through with "all" my two patients and walked over.

"What is the matter with the baby? Where is he?"

"The baby is dead," whispered Birdie, averting her eyes.

"Dead?" I said incredulously. "That can't be. Maybe he has had a spasm. Let me see him. Where is he?"

"Oh, please, doctor, don't look at him. Don't uncover him. He is right here in bed near me. But don't uncover him," begged Birdie.

Here I got angry. I *knew* that some foul deed was done here.

"Who killed the baby?" I cried. "The baby was in perfect health when I left him yesterday morning. How did it happen, and who is responsible for it?"

"Nobody did anything to him. He wasn't well. He must have caught a cold after the bath I gave him. He was coughing all day. Maybe he got pneumony." That from Lizzie the slattern.

“If he was sick yesterday, why wasn’t I called for?”

“We thought it would pass; but this morning he got real sick, and then he began to choke, and was dead.”

I went up to the bed, and against Birdie’s protest, uncovered the child. There the poor kid lay stiff and dead, and cyanotic (blue) from the crown of his head to his little toes. There wasn’t any doubt in my mind that the poor child was poisoned or strangled—or both.

What was I to do?

“I am sorry,” I said, “but this is a case of murder, and I have to go at once to report it to the coroner.”

Here Birdie began to cry loudly, the stoical Mrs. Ellis wept silently, and the slattern Lizzie began to scream that she had nothing to do with it, that she only did what she was told to do, and if anybody was going to make her any trouble, she’d tell everything; she wasn’t going to suffer for other people, etc., etc. I finally had to tell her to shut up and get out. As she did so, I noticed the landlady standing by the door and eavesdropping. Even if I should have had an inclination to hush the thing up, I could not do so

now. Mrs. Ellis also noticed the landlady and knew that she knew everything.

What was to be done?

“We throw ourselves on your mercy. We will tell you how it happened. If there is any way to get us out of it or to make things easier, please help us. We two are really alone in the world. And the thing when it comes out will surely kill poor father and mother.” This from Mrs. Ellis.

“Mrs. Ellis,” I told her, “you know I would do anything within reason for you. But there are things which neither our professional ethics nor personal safety would permit me to do. To give a false death certificate would be compounding a crime. But give me time to think. I must consult with my professional colleagues, and if there is any way out, I shall do all I can to help you. It is a terrible thing. I must have time to think.”

I gathered from what Mrs. Ellis told me that either the slattern Lizzie or Birdie herself put a basin of bichloride solution into the baby’s bathtub while it was being bathed. And in a few minutes it was dead.

I shut myself up in my office trying to think. But I cannot think well while confined within

four walls; I do my thinking best in the open. And so I went for a long walk.

I tried to visualize the consequences if I reported the case. Birdie would be immediately arrested, probably also the slattern Lizzie; Mrs. Ellis also as a material witness; and last, but not least, the scandal and the newspaper publicity would kill the poor old parents. There also would be a lot of newspaper publicity for me, though my conduct in the matter being strictly correct and ethical and in accordance with the law, the publicity would not be of an undesirable character. Birdie would probably get ten or twenty years in prison, her life would be over, ruined; and that was not a pleasant thought. The child would not be brought to life again.

On the other hand, if I did not report the case I was running the risk of being an accomplice to a crime, or at least to criminal negligence. I did not know what to do. I finally decided to present the details of the case to two of my friends, Professor Egbert Le Fevre and the Nestor of American medicine, Professor A. Jacobi, and to be guided by their advice in the matter. I was a beginner, they were veterans in the profession and I knew that it was safe to follow their ad-

vice. Dr. Jacobi advised me to see the then coroner, Dr. Hoeber (the father of the present New York medical publisher, Paul S. Hoeber), to whom he gave me a letter of introduction. I told the coroner the entire story.

“You have not seen with your own eyes what was done to the child, have you?”

I told him, no.

“You don’t know of your own knowledge what happened to the child?”

“No, but I am pretty sure.”

“But it isn’t altogether excluded that an accident could have happened to it, or that it could have died from spasm or infantile convulsions?”

“No, that is not altogether excluded. . . .”

In short the Coroner’s advice seemed to be that in view of all the circumstances it would be best to throw the mantle of charity over the entire case. Though Dr. Jacobi’s note did not commit him one way or another, though it was a mere introduction, Dr. Hoeber evidently took it for granted that it was Dr. Jacobi’s desire that the matter be hushed up. Perhaps he himself wanted to avoid the annoyance of having to perform an autopsy, of the possibility of interviews with reporters, and so forth.

He gave the necessary permit for a burial certificate, and the child, poor Johnny Smith, was wrapped up, taken by a man under his arm and buried without a coffin, unaccompanied and unwept.

The termagant landlady said she was going to make trouble because everything wasn't right in the case, but when she found that I had reported the case to the Coroner, and that I had a permit from him, she quieted down.

During the next two or three years I saw Birdie off and on. She would come to the office to consult me for some slight ailment. Once I was called to her house to treat her for what proved to be influenza or pneumonia; but I afterwards lost track of her.

CHAPTER TEN

DOCTORS ACTING AS DETECTIVES

What I think of my professional colleagues who, when the woman is deathly sick or in a dying condition, will assume the rôle of spies and badger her, trying to force her to make an ante-mortem statement, trying to find out the name of the person who performed the abortion—well, I really do not possess the vocabulary which would adequately express my deep contempt. In my opinion they belong to the lowest rung of the moral ladder. I came across several such cases. I reported two of them in “America’s Sex, Marriage and Divorce Problems,” and they are so much apropos that they will bear reproducing, in part at least:

The young man who told me the story is a fairly well-known writer. He belongs to the class of moderate radicals. He is universally esteemed and his credibility is beyond question. He had been living with a nice young girl for some time. Unfortunately she was “caught.” To let it go would have been out of the question: loss of posi-

tion, loss of earning capacity, disgrace, ostracism, the question of bringing up the child, etc., etc. She tried all kinds of remedies with the sole result that they spoiled and inflamed her stomach. She then visited some physicians; two or three refused; finally one had pity on her and produced an abortion. Whether because the doctor was not sufficiently skillful, or sufficiently careful, she became quite ill. On the following day she got a severe hemorrhage and soon developed a septic infection, and signs of peritonitis made their appearance.

She called in a doctor who had been their family physician, but he, knowing that it was a case of induced abortion, refused to have anything to do with it, and sent her to the hospital. There two doctors soon began to ply her with questions as to who the author of her trouble was, particularly they wanted to know the name of the physician who induced the abortion. The girl stoutly maintained that nobody had induced an abortion on her, that it came on by itself, but the physicians would not leave her in peace. They insisted that all the symptoms pointed unmistakably to the fact that a criminal abortion had been produced, and insisted upon knowing the name

of the doctor. She persisted in her statement. They kept plying her with questions, and a day or two later, when she was very sick, they told her that she would probably die and that she must make an ante-mortem statement.

Sick as she was, the girl showed them plainly what contempt she had for them, and told them that even if she had to make a dozen ante-mortem statements, she would say nothing else than what she had told them. She didn't care if she had to die; we all have to die sometime. Finally they let her alone, she recovered and is completely well now.

Just think of a girl lying dangerously ill, all alone, being subjected to the third degree, forcing her to the most dishonorable action of which a person could be guilty namely, betraying the name of the man who at her own request and solicitation tried to relieve her from disgrace, social ostracism and possible suicide! And think of bothering her with "ante-mortem" statements, thus, by frightening her, actually endangering her recovery! Even if the man who performed the operation did break the statute, it was none of the hospital doctors' business. Let the police attend to that. The business of the doctor is to

relieve pain, cure disease and save life, not to act as a bloodhound to the State.

And I wish to state emphatically that this little slip of a girl, though she lived in illicit relations with the man she cared for, and though she had an abortion produced on herself, towers morally head and shoulders above those two members of the medical profession, who tried to badger her into betraying her benefactor; her behavior is quite admirable; theirs utterly contemptible. She is to them what Mount Everest is to a dunghill.

Another case. A woman physician is under arrest, charged with having induced an abortion on a young girl. The girl was brought to the Lying-in Hospital, and the doctors there, after subjecting her to the third degree, ferreted out from her the name of the physician who is supposed to be responsible for her condition.

I presume the doctors congratulate themselves, in the belief that they have done a good deed, that they have acted in behalf of the law and morality. But as far as I am concerned they fill me with unutterable disgust; it is only parliamentary usage that prevents me from giving full expression to my opinion of them. How long will members of a noble and liberal profession con-

sent to act the rôle of bloodhounds, tearing from the breasts of girls, tortured by physical and mental agony, secrets which do not concern them at all? There is not a despicable rôle or position for which candidates may not be found among members of the medical profession. And the hypocrisy of the thing! The very doctors who show such ferocious zeal in ferreting out from a victim the name of the abortionist, would, in ninety cases out of a hundred, themselves perform an abortion if the price were only sufficiently tempting.

And recently I came across another case which made my blood boil. An unmarried woman, forty-two years of age, who had but recently had her first sex experience, was unfortunate enough to become pregnant. As her menses had been irregular during the past two or three years, and as she had not menstruated for about three months prior to her sex experience, she paid no attention. She thought she was approaching the menopause. She was in the fourth or fifth month when she became aware that she was pregnant. Several doctors to whom she applied refused to do anything for her. It was too late. Finally by scraping, borrowing and pawning things, she

accumulated a considerable sum of money, and found a physician who was willing to undertake the risk. She was then in the sixth month. There was considerable hemorrhage which weakened her, infection set in and she was dying. Two doctors were called, and one of them particularly tried to get from her the name of the man guilty of the operation. She knew she had little chance of recovery, but she firmly refused to say anything. "Why should I? He didn't come to me. I went to him and begged him to do me the favor. And what difference does it make? If he had not agreed to do it, I was going to take poison anyway. I would not have gone through the disgrace of an illegitimate baby. He gave me at least a chance. And it is useless for you to bother me. I won't say anything." And she didn't. And she died; a moral heroine. And the poor creature that does betray the name of the man or the woman who acceded to her prayers and did what she urgently requested to have done—well, she is a poor creature, who is probably not in the full possession of her senses, and we can only pity her. Peace with her if she survives, peace to her ashes if she dies.

It is remarkable that the parents or relatives

of the unfortunate girl who is in danger of forfeiting her life, or who forfeits it, hardly ever feel resentment towards the doctor or midwife who performed the operation; they consider that he or she acted in good faith and did them a favor. It is only brother physicians and the police that are filled with "moral" indignation and act like bloodhounds pursuing a quarry.

CHAPTER ELEVEN

WHY THE LAW AGAINST ABORTION SHOULD BE REPEALED

The law against abortion should be repealed, first, because it is a vicious, injurious law; and, second, because it is a futile, unworkable law. It has a good deal in common with our prohibition law. Prohibition has not stopped drinking, but it has increased the price of alcoholic beverages, vitiated their quality and put the trade into the hands of degenerates, grafters, racketeers and criminals. And so the law against abortion has not done away with abortions. And, *en passant*, if the law were one hundred per cent workable and efficient, if it made the performance of abortions really impossible, it would be the most pernicious law in our penal code; because it would lead to an enormous number of suicides, to an incalculable amount of anguish, shame, disgrace and ostracism. And it is only because people despise the law, because there are doctors and others who out of sympathy or for money are willing to risk their liberty in order

to free the anguished girl or overburdened mother from an undesired pregnancy, that that law is not so pernicious as it might be. But what *does* that law do?

Because the performance of an abortion is illegal, the operation is surrounded with fear and secrecy, many doctors will have nothing to do with it, those who do undertake it, because of the risk involved, demand fees which the poor are unable to afford, and are therefore obliged to have recourse to utterly ignorant midwives; some cannot even find a midwife to help them, so they are obliged to have recourse to inefficient or irritating and toxic drugs, and they either ruin their health, or lose their lives, and some as a last resort have recourse to suicide or to infanticide.

In brief, the law against abortion has not done away with abortions—about two million of them are performed in the United States annually—but it has driven them into dark places, it has placed them *largely* in the hands of either professional abortionists or incompetent midwives, it has made them expensive, often beyond the means of those who need them most; and as many of the victims of undesired pregnancies can find nobody to help them out, it has been responsible

for an incalculable amount of suffering and anguish, of infection and invalidism, of deaths and suicides.

The number of deaths from infection caused by attempts at self-abortion and of suicides committed by those who find themselves in a helpless and hopeless condition, will never be known—because the causes of death and suicide are often concealed or masked—but it is very large.

And so because the law against abortion accomplishes no good but causes an incalculable amount of harm, it should be repealed.

If desired, a clause could be inserted permitting abortion only until the end of the third month, and only a certain number of times in the case of any given woman, as is the case now in Soviet Russia.

I feel quite certain that at this point somebody will interpolate the remark that because abortions are performed in spite of the law against them is no reason for abolishing the law. We might as well, the objector will continue, abolish the laws against burglary, arson, and murder, because these crimes are being daily committed in spite of the laws against them. But, first, with people who put abortion on the same level as

burglary, arson and murder, it is useless to enter into any arguments. There are people of such a mental caliber that any discussion with them would be futile. And second I did not say that the law against abortion should be abrogated because it is unworkable; it *is* futile and unworkable, but it should be abrogated because it is *per se* a vicious, pernicious, harmful law. If it were thoroughly workable and efficient, then its repeal would become still more *imperative*. The only thing that saves it from working still greater injury than it does is the disregard in which it is held and the breach to which it is subjected daily, hourly, in every country in the world.

I doubt if in Russia where abortion is quite legal more abortions are produced annually than in other countries in which it is a heinous crime punishable by imprisonment, by hard labor for many long years.

SUMMARY

We demand legalized prevenception in order to do away with abortions. We demand abortions to be legalized in order to do away with infanticide, in order to save thousands of women from the hands of incompetent and ignorant bunglers,

in order to save thousands and thousands of women from shame, disgrace, ostracism, blood poisoning, invalidism, death and suicide. Briefly and once more:

1. Abortion under certain safeguards should be made legal.

2. As a general rule, abortion should be permissible up to the end of the third month only. Only in exceptional cases and for valid reasons should abortion be permitted in the fourth, fifth or sixth month. Of course therapeutic abortion should be permitted in any month according to the physician's judgment.

3. Only properly licensed physicians, and preferably those specializing in obstetrics and gynecology, should be permitted to perform abortions. The performance of an abortion by unqualified men or women should remain a penal offence.

CHAPTER TWELVE

THE AUTHOR AND ABORTIONS

I assume, and the assumption is not so fantastic or far-fetched, that my professional colleagues will say or at least think that the author of this book who defends so ardently the right of the woman to her own body and so valiantly and courageously demands the abrogation of the anti-abortion laws must be actively, or at least more or less so, engaged in carrying on the business of abortion.

No, dear brethren, the author of this book is not an abortionist, neither professional nor amateur, neither regular nor occasional. He who is engaged in the abortion business, either constantly or occasionally, does not speak or write in its defence. He either keeps quiet, maintains silence on the subject, or when he speaks does so in deprecation of the practice. He may even get up on a very altitudinous horse and condemn it in the most intemperate language.

Just as he who advocates a rational attitude towards masturbation is not necessarily a mas-

turbator, just as he who demands that homosexuality be investigated in a scientific and charitable spirit is not necessarily a homosexual, just as he who demands the repeal of the prohibition law is not necessarily a souse or even a moderate drinker (the author demands all three and yet he is neither a masturbator, nor a homosexual nor a drinker in even the most moderate degree), so is he who demands the repeal of the perniciously harmful anti-abortion law not necessarily an abortionist. Just the contrary *may* be, and as far as the author is concerned *is* the case.

I touched on this very point in my paper twenty years ago. This is what I then said: There is no reason why this question could not be discussed calmly, judicially, without bias and without fear. And I can do this the more readily, because, strange as this statement may sound to you, I personally have never produced an abortion. Yes, it is twenty years since I received my M.D. degree, and during that time I have not committed one single abortion. I know this sounds strange, but it is so.

But, pray, do not for one moment imagine that it was on moral grounds that I refused the hundred of pleading, weeping, heart-broken, dis-

tracted women, married and unmarried, who begged and entreated to be freed of the fruit of their womb. No, I repeat, it was not moral superiority; it was pure cowardice principally. I may have contempt for a law, but I prefer to obey it as a matter of wisdom—as a matter of egotism, if you will. I have always felt that I have something important to do in this world; I felt that I had a message for humanity, and I therefore thought it best not to endanger my peace of mind and not to run the risk of getting into the clutches of the law. There is no particular merit in such an attitude. It is a policy of wisdom, but it has nothing to do, I wish to emphasize, with high moral courage.

So you see what my personal views are. But I have always had deep contempt for the hypocrite, and likewise great pity for the muddle-minds who would get up in a medical society and brand the commission of an abortion as a crime exactly equivalent to that of murder, and would, with eyes raised to heaven, stigmatize the one guilty of an abortion, whether it be the aborter or abortee, as a murderer.

If every physician who even once in his career—under the stress of tragic circumstances, in

order to save the life and reputation of a young girl and the happiness of her parents—performed an abortion, is a murderer, then seventy-five percent, nay, probably ninety percent of the medical profession are murderers. And if every woman who had an abortion performed on her is a murderess, then millions of our child-bearing women are murderesses. And I tell you that some of them are beautiful murderesses, sweet, gentle, kind, attached to their husbands and children, devoted to charitable work, and altogether lovable. A peculiar kind of murderess.

Should any of my utterances appear to you too radical, should any of my friends think that some of the things I say might better be left unsaid, then I can only reply, paraphrasing slightly the young genius, the lamented author of “The Martyrdom of Man”: In the matter of speaking or writing I listen to no remonstrance, I acknowledge no advice, no decision save that of the monitor within me. My conscience is my adviser, my audience, and my judge. It bids me write and speak as I write and speak, without evasion, without disguise; it bids me go on as I have begun, whatever the result may be. If my opinions should be condemned, without a single exception,

by every one of my readers, it will not make me regret having expressed them, and it will not prevent me from expressing them again.

And with these words I shall conclude this unpretentious but unequivocal book. And I feel certain that it will exert a good influence, that it will have an effect if not in abrogating, at least in modifying the law against abortion, or in making it a dead letter. If not that, it should at least be instrumental in rendering our juries, before whom abortion cases may come up, more liberal, more understanding, more humane. It would have that effect unquestionably if it could have the circulation which it deserves to have.



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